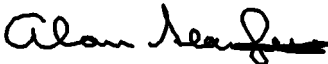


|   |  |                                     |                       |  |   |  |  |                              |  |  |  |                  |  |
|---|--|-------------------------------------|-----------------------|--|---|--|--|------------------------------|--|--|--|------------------|--|
| <b>ORDER FOR SUPPLIES OR SERVICES</b><br>(Contractor must submit four copies of invoice.)   |  |                                     |                       |  |   | Form Approved<br>OMB No. 0704-0187<br>Expires Jun 30, 1997   |  | PAGE 1 OF<br><b>5</b>        |  |  |  |                  |  |
| Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503. |  |                                     |                       |  |   |  |  |                              |  |  |  |                  |  |
| <b>PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES.</b><br><b>SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.</b>  |  |                                     |                       |  |   |  |  |                              |  |  |  |                  |  |
| 1. CONTRACT/PURCH ORDER NO.<br><b>SPM760-05-V-0110</b>  |  |                                     | 2. DELIVERY ORDER NO. |  | 3. DATE OF ORDER (YYMMDD)<br><b>2004 OCT 05</b>   |  | 4. REQUISITION/PURCH REQUEST NO.<br><b>0010696686</b>              |                              | 5. PRIORITY<br><b>DOC9</b>   |  |  |                  |  |
| 6. ISSUED BY<br><b>Defense Supply Center Columbus<br/>P.O. Box 3990<br/>Columbus, OH 43218-3990<br/>Local Administrator: PMCMAS5 ( ) 692-3638 / FAX: (614)693-1553<br/>E-mail: Susan.Coyer@dla.mil</b>  |  |                                     | CODE <b>SP0700</b>    |  | 7. ADMINISTERED BY (If other than 6)<br><b>DCMA SOUTH FLORIDA - HOLLYWOOD<br/>(954) 987-7468 X238 OR X225<br/>6100 HOLLYWOOD BLVD SUITE 310<br/>HOLLYWOOD FL 33024-7981</b> |  |  | CODE <b>S1212A</b>           |  | 8. DELIVERY FOB<br><input checked="" type="checkbox"/> DEST<br><input type="checkbox"/> OTHER<br>(See Schedule if other) |  |                  |  |
| 9. CONTRACTOR<br><b>SUPERSONIC SERVICES, INC.<br/>12399 SW 53RD STREET<br/>SUITE 103<br/>COOPER CITY FL 33330-3308</b>  |  |                                     | CODE <b>0UCW1</b>     |  | FACILITY CODE   |  | 10. DELIVER TO FOB POINT BY (Date) (YYMMDD)<br><b>114 DAYS ADO</b> |                              | 11. MARK IF BUSINESS IS<br><input checked="" type="checkbox"/> SMALL<br><input type="checkbox"/> SMALL DISADVANTAGED<br><input type="checkbox"/> WOMEN-OWNED |  |  |                  |  |
| NAME AND ADDRESS  |  |                                     |                       |  |   |  | 12. DISCOUNT TERMS<br><b>NET 30 days</b>                           |                              | 13. MAIL INVOICES TO<br><b>See Block 15</b>  |  |  |                  |  |
| 14. SHIP TO<br><b>See Schedule - Do Not Ship to Address in Block 6</b>  |  |                                     | CODE                  |  | 15. PAYMENT WILL BE MADE BY<br><b>DFAS BVDP (SL4701)<br/>P.O. BOX 369031<br/>COLUMBUS OH 43236-9031</b>   |  |  | CODE <b>SL4701</b>           |  | MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER   |  |                  |  |
| EFT: T  |  |                                     |                       |  |   |  |  |                              |  |  |  |                  |  |
| 16. TYPE OF ORDER   |  | DELIVERY                            |                       | This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.   |   |  |  |                              |  |  |  |                  |  |
|   |  | PURCHASE                            |                       | Reference your <b>offer dated 2004 OCT 01, 162708</b> and furnish the following on terms specified herein.   |   |  |  |                              |  |  |  |                  |  |
|   |  | <input checked="" type="checkbox"/> |                       | <b>ACCEPTANCE.</b> THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME. |   |  |  |                              |  |  |  |                  |  |
| NAME OF CONTRACTOR _____ SIGNATURE _____ TYPED NAME AND TITLE _____ DATE SIGNED (YYMMDD) _____<br><input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:  |  |                                     |                       |  |   |  |  |                              |  |  |  |                  |  |
| 17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE<br><b>BX:97X 4930 5CBX 001 2630 S33189</b>  |  |                                     |                       |  |   |  |  |                              |  |  |  |                  |  |
| 18. ITEM NO.  |  | 19. SCHEDULE OF SUPPLIES/SERVICE    |                       |  |   | 20. QUANTITY ORDERED/ACCEPTED*   |  | 21. UNIT                     |  | 22. UNIT PRICE   |  | 23. AMOUNT       |  |
|   |  |                                     |                       |  |   | <b>TOTAL:<br/>4</b>  |  |                              |  |  |  |                  |  |
| * If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.  |  |                                     |                       |  |   | 24. UNITED STATES OF AMERICA <b>Alan Searfoss</b>  |  | PXCBEI                       |  | 25. TOTAL  |  | <b>\$ 884.00</b> |  |
|   |  |                                     |                       |  |   | BY:                           |  | CONTRACTING/ORDERING OFFICER |  | 29. DIFFERENCE   |  |                  |  |
| 26. QUANTITY IN COLUMN 20 HAS BEEN<br><input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED  |  |                                     |                       |  |   | 27. SHIP. INV.<br><input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL                                |  | 28. D.O. VOUCHER NO.         |  | 30. INITIALS   |  |                  |  |
| DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____  |  |                                     |                       |  |   | 31. PAYMENT<br><input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL |  | 32. PAID BY                  |  | 33. AMOUNT VERIFIED CORRECT FOR  |  |                  |  |
| 36. I certify this account is correct and proper for payment.<br>DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____   |  |                                     |                       |  |   |  |  |                              |  | 34. CHECK NUMBER   |  |                  |  |
|   |  |                                     |                       |  |   |  |  |                              |  | 35. BILL OF LADING NO.   |  |                  |  |
| 37. RECEIVED AT   |  | 38. RECEIVED BY (Print)             |                       | 39. DATE RECEIVED (YYMMDD)   |   | 40. TOTAL CONTAINERS   |  | 41. S/R ACCOUNT NUMBER       |  | 42. S/R VOUCHER NO.  |  |                  |  |

## CONTINUATION SHEET

Order Number:

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## SECTION B

PR 0010696686  
NSN 4720-01-310-1755

## ITEM DESCRIPTION:

HOSE ASSEMBLY, NONMETALLIC. 27/64 ID.,  
32.000 IN. WORKING LENGTH.

IF AQLS ARE LISTED IN THE SPECIFICATION(S)  
OR DRAWING(S) THEY MAY BE USED TO ESTABLISH THE  
AUTHORIZED SAMPLE SIZE, HOWEVER, THE ACCEPTANCE  
NUMBER FOR THIS CONTRACT IS ZERO; I.E., THIS  
CONTRACT REQUIRES A SAMPLING PLAN THAT ACCEPTS  
ON ZERO DEFECTS AND REJECTS ON ONE OR MORE  
DEFECT(S).

"CLASS I OZONE DEPLETING CHEMICALS ARE NOT TO BE  
USED NOR INCORPORATED IN ANY ITEMS TO BE  
DELIVERED UNDER THIS CONTRACT. THIS PROHIBITION  
SUPERSEDES ALL SPECIFICATION REQUIREMENTS BUT  
DOES NOT ALLEVIATE ANY PRODUCT REQUIREMENTS.  
SUBSTITUTE CHEMICALS MUST BE SUBMITTED FOR  
APPROVAL UNLESS THEY ARE AUTHORIZED BY THE  
SPECIFICATION REQUIREMENTS."

FULL AND OPEN COMPETITION APPLY

CRITICAL APPLICATION ITEM

I/A/W DRAWING NR VC-53711-5544045  
BASIC  
AMEND NR C DTD 92 DEC 16  
TYPE NUMBER:

| <u>ITEM</u>                    | <u>PR</u>  | <u>PRLI</u> | <u>QUANTITY</u> | <u>UNIT</u> | <u>UNIT PRICE</u> | <u>AMOUNT</u> |
|--------------------------------|------------|-------------|-----------------|-------------|-------------------|---------------|
| 0001                           | 0010696686 | 0001        | 4               | EA          | \$221.00000       | \$884.00      |
| QTY VARIANCE: PLUS 0% MINUS 0% |            |             |                 |             |                   |               |
| INSPECTION POINT: ORIGIN       |            |             |                 |             |                   |               |
| ACCEPTANCE POINT: ORIGIN       |            |             |                 |             |                   |               |

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## SECTION B

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999

QUP = 001: PRES MTHD = AE: CLNG/DRY = 1: PRESV MAT = 00:

WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:

UNIT CONT = BV: OPI = O:

INTRMDTE CONT = DO: INTRMDTE CONT QTY = AAA:

PACK CODE = U:

MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.

SPECIAL MARKING CODE: 00 - No special marking

PALLETIZATION SHALL BE IN ACCORDANCE WITH MD00100452 REV A

DATED 4090

SUPPLEMENTAL INSTRUCTIONS

PACKAGING SHALL BE IAW MIL-H-775.

For all shipments of packaged materiel to the government, which includes either depot (DLA-direct) or DVD (customer-direct) shipments, both DoD linear and 2-D bar code markings are required on military shipping labels in accordance with MIL-STD-129, revision P, dated December 15, 2002. 2-D bar coding shall be in accordance with ISO/IEC 15438, ISO/IEC 15434 (ANSI MH10.8.3) and DoD 4500.9-R. MSL linear (code 3 of 9 or code 39) bar coding shall be in accordance with ISO/IEC 16388. MSL label stock quality shall meet MIL-PRF-61002. MSL bar code print quality shall meet ANSI MH10.8-2000 or ANSI X3.182-1990 (R2000) for applicable 2-D and/or linear bar codes. All DVD shipments shall meet additional linear bar coding requirements in DLAD 52.211-9008. When the contract/order omits any data element required to be bar-coded, the field shall be zero-filled. These requirements do not apply to delivery orders when the basic contract has not been modified to require MIL-STD-129P. If there are inconsistencies between the schedule and MIL-STD-129P, the schedule takes precedence.

DELIVER FOB: DESTINATION BY: 2005 JAN 27

PARCEL POST ADDRESS:

W62G2T

XU DEF DIST DEPOT SAN JOAQUIN

TRANSPORTATION OFFICER

PO BOX 960001

STOCKTON CA 95296-0130

US

CONTINUED ON NEXT PAGE

SECTION B

FREIGHT SHIPPING ADDRESS:

W62G2T  
XU DEF DIST DEPOT SAN JOAQUIN  
25600 S CHRISMAN ROAD  
REC WHSE 10 PH 209 839 4307  
TRACY CA 95304-5000  
US

NON-MILSTRIP  
PROJ

\* \* \* \* \*

REMIT PAYMENT TO:

\* \* \* \* \*

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|  |                                   |           |                  |
|--|-----------------------------------|-----------|------------------|
| CONTINUATION SHEET   | Order Number:<br>SPM760-05-V-0110 | PAGE<br>5 | OF<br>PAGES<br>5 |
| <p>THE PURCHASE ORDER CLAUSES ARE APPLICABLE AS INDICATED IN THE<br/>DLA MASTER SOLICITATION FOR AUTOMATED SOLICITATIONS AND<br/>RESULTING AWARDS REVISION 04 FOUND ON THE WEB SITE AT<br/><a href="https://www.dibbs.bsm.dla.mil/">https://www.dibbs.bsm.dla.mil/</a></p> |                                   |           |                  |